

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214508572						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Alterra America Insurance Company</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: RICHARD RANDOLPH GRINNAN 4521 HIGHWOODS PARKWAY GLEN ALLEN, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: DE</p> </div> <div style="width: 35%;"> <p>DUE DATE: 2/28/2014</p> <p>SCC ID NO: F0056798</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>18,000</td> </tr> <tr> <td>PREFER</td> <td>5,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	18,000	PREFER	5,000
CLASS	AUTHORIZED							
COMMON	18,000							
PREFER	5,000							
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 4521 Highwoods Parkway</p> <p style="margin-left: 40px;">CITY/ST/ZIP: Glen Allen, VA 23060</p>								
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: BRYAN SANDERS TITLE: VICE PRESIDENT ADDRESS: 4521 Highwoods Parkway CITY/ST/ZIP/CO: Glen Allen, VA 23060 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: BRYAN SANDERS TITLE: VICE PRESIDENT ADDRESS: 4521 Highwoods Parkway CITY/ST/ZIP/CO: Glen Allen, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR			
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NAME:	Robin Russo	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	4521 Highwoods Parkway		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
NAME:	Robert Glenn Whitt, III	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	Controller		
ADDRESS:	4521 Highwoods Parkway		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
NAME:	Richard Reeves Whitt, III	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Sr Vice Preside		
ADDRESS:	4521 Highwoods Parkway		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
NAME:	Richard Randolph Grinnan	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	4521 Highwoods Parkway		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
NAME:	April Lynn Duff	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	4521 Highwoods Parkway		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
NAME:	Kathleen Anne Sturgeon	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	4521 Highwoods Parkway		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
NAME:	Genevieve Kickertzt Murtaugh	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	4521 Highwoods Parkway		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
NAME:	Kelli S Plusch	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	4521 Highwoods Parkway		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
NAME:	Gerard Albanese, Jr.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4521 Highwoods Parkway		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
NAME:	Britton Lee Glisson	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4521 Highwoods Parkway		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
NAME:	Bradley James Kiscaden	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4521 Highwoods Parkway		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			

/s/ BRYAN SANDERS	BRYAN SANDERS, VICE	2/15/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT	DATE
	PRINTED NAME AND CORPORATE TITLE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		